

**Coordinated Review Effort
School Data
SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR**

**1st Review: NSLP () SBP ()
Follow-Up: NSLP () SBP ()**

SFA:	Date of Review:		
School:			
Address:			
Name/Title of Person(s) Interviewed:			
Reviewer(s):			
1. Type of School: (check all that apply) <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Charter <input type="checkbox"/> Regular <input type="checkbox"/> Boarding <input type="checkbox"/> RCCI <input type="checkbox"/> Other _____ <input type="checkbox"/> Pricing _____ <input type="checkbox"/> Non Pricing <input type="checkbox"/> Closed Campus <input type="checkbox"/> Open Campus <input type="checkbox"/> Traditional Schedule # of Days per week () <input type="checkbox"/> Year Round Schedule <input type="checkbox"/> Single-Track <input type="checkbox"/> Multi-Track Number of Tracks () <input type="checkbox"/> Provision 2 Base Year () Year 1 () 2 () 3 () 4 ()	2a. Type of meal service: (check all that apply) <input type="checkbox"/> On Site Preparation <input type="checkbox"/> Base/Central Kitchen <input type="checkbox"/> Pre-packaged Satellite <input type="checkbox"/> Bulk Satellite b. Program: (check all that apply) <input type="checkbox"/> NSLP <input type="checkbox"/> SBP <input type="checkbox"/> SMP <input type="checkbox"/> SSO <input type="checkbox"/> ASCP c. () Food Service Management Company () Vended Name: _____		
	LUNCH	BREAKFAST N/A ()	COMMENTS
3. Grades Participating: BY & Current YR			
4. Total Students with Access: BY & Current YR			
5. Average Daily Attendance Factor: BY L <input type="checkbox"/> S <input type="checkbox"/> N <input type="checkbox"/> Current YR L <input type="checkbox"/> S <input type="checkbox"/> N <input type="checkbox"/>	() L () S () N	() L () S () N	
6. Review Period/ # of Serving Days-BY/Current YR:	BY # CY #	BY # CY #	
7. Offer Vs. Serve:	() Y () N If yes, Number of Meal/Components: _____	() Y () N If yes, Number of Meal/Components: _____	
8. A La Carte Available:	() Y () N	() Y () N	
9. Serving Times:			
10. Meals Served In:	() Cafeteria () Classroom () Outdoors () Other (describe in comments)	() Cafeteria () Classroom () Outdoors () Other (describe in comments)	
11. Number of Points where Meal Counts are Taken:			

Day of Review:	LUNCH				BREAKFAST N/A ()			
12. Reviewer's Count of Eligible Students Based on the LEA's Determination: (BY & Current YR): Free (F) Reduced (R) Paid (P)	BY		Current YR		BY		Current YR	
	F _____		F _____		F _____		F _____	
	R _____		R _____		R _____		R _____	
	P _____		P _____		P _____		P _____	
13. School's Combined Counts for the Day of Review:			___ Reviewer's Counts for the Day of Review:			= Difference +/-		
LUNCH	BREAKFAST N/A ()		LUNCH	BREAKFAST N/A ()		LUNCH	BREAKFAST N/A ()	
F	F		—	—		=	=	
R	R		—	—		=	=	
P	P		—	—		=	=	
14a. School's Reported Meal Counts - Review Period % & ACTUAL COUNTS FOR CLAIM: BASE YEAR				SFA Claim for this School for the Review Period: % & ACTUAL COUNTS FOR CLAIM: BASE YEAR:		___ Reviewer's Validation % & ACTUAL COUNTS FOR CLAIM: BASE YEAR:		= Difference +/-
%	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()
F	%				—	—		
R	%				—	—		
P	%				—	—		
T	%				—	—		
14b School's Reported Meal Counts - Review Period CALCULATED COUNTS FOR CLAIM CURRENT YR				SFA Claim for this School for the Review Period: CALCULATED COUNTS FOR CLAIM CURRENT YR		___ Reviewer's Validation CALCULATED COUNTS FOR CLAIM CURRENT YR		= Difference +/- CALCULATED COUNTS FOR CLAIM CURRENT YR
BY VALID.%	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()
F	%				—	—	=	=
R	%				—	—	=	=
P	%				—	—	=	=
T	100%				—	—	=	=
			LUNCH			BREAKFAST (NA)		
15. Base Year ADP Factor If Needed: Validated ÷ Serving Days ÷ Eligible Students			Free			Free		
			Reduced			Reduced		
			Paid			Paid		

	LUNCH		BREAKFAST N/A ()		COMMENTS
16. Day of Review # of Ineligible &/or Second Meals Counted:					
17. Meals Served with PS2 Errors*:					
	LUNCH		BREAKFAST N/A ()		COMMENTS
18. Day of Review Meal Observation	Observed	Incomplete	Observed	Incomplete	

***A PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, and at the State agency's discretion, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium and *trans* fat).**

INSTRUCTIONS FOR PROVISION 2 S-1 SCHOOL DATA FORM

Designate check [✓] the type of administrative review being conducted: 1st review or follow-up, NSLP or SBP. Use two sets of forms, one for each program.

1. Indicate the type of school by checking [✓] as many categories* as apply. Indicate the Base Year for Provision 2, check [✓] the current year cycle. To determine the year of the Provision, refer to Provision 2 Optional Form O-5, a worksheet designed to determine cycle years. The Provision 2 Base Year is outside the four-year cycle.
- 2a. Check [✓] all types of meal service which apply to this individual school for both breakfast and lunch meal service.
- b. Check [✓] all Child Nutrition Programs that are offered at this school, i.e., National School Lunch Program (NSLP), School Breakfast Program (SBP), Special Milk Program (SMP), Seamless Summer Option (SSO), and/or Afterschool Snack Care Program (ASCP).
- c. Check [✓] if meal service is provided by a food service management company or meals are vended and enter the name(s) of the company (ies).
3. Enter the grades from all schools which participate in the NSLP and SBP, as applicable, at this school for both the Base Year and the Current Year. For example, if kindergarten children attend the school but do not have access to NSLP or SBP, this grade must be excluded from the grades that participate in the NSLP or SBP, as applicable.
4. Enter the total number of students who have access to the NSLP and SBP, as applicable at this school for the Base Year and Current Year. For example, if kindergarten children attend the school but do not have access to the NSLP and SBP, as applicable, these children must be excluded from the number of children that have access to the NSLP and SBP, as applicable. This figure should encompass the time period for the review period. If this number is not available, use the number which is most representative of the review period. Calculate the Percent Change in Enrolled Students with Access by subtracting the Base Year number from the Current Year number. Divide the result by the base Year number, carry to 4 decimal places, round to 3 decimal places and multiply by 100 to convert to a percentage. If the enrollment has increased from the Base Year to the Current Year, record the Percent Change as a positive (+) number. If the enrollment has decreased from the Base Year to the Current Year, record the Percent Change as a negative (-) number.
5. Enter the Average Daily Attendance (ADA) factor for both the Base Year and the Current Year for NSLP and SBP, as applicable and check [✓] the source of the ADA factor, Local (L), State (S) or National (N). The local factor may be an attendance factor supplied by the SFA or one developed by the reviewer using local data. The reviewer should use the factor which provides the most accurate reflection of the actual attendance for the review period for this school. The attendance factor must be in decimal form rounded to three places.
6. Enter the review period (month and year) and number of serving days in the review period for NSLP and SBP, as applicable.
7. Indicate whether the school implements Offer versus Serve for NSLP and SBP, as applicable. If YES, enter the number of required components for a reimbursable meal.
8. Indicate whether the school has a la carte service available for NSLP and SBP, as applicable.
9. Record the time(s) when the meal service for NSLP and SBP, as applicable begins and ends.
10. Indicate each location where meals are served for NSLP and SBP, as applicable. If OTHER, describe the location or setting in the comments section.
11. Enter the number of points where meal counts are taken for NSLP and SBP, as applicable.
12. Count the number of students eligible for free and reduced price meals, during the review period as the Local Education Agency (LEA) originally approved them, including all direct certification, homeless, migrant, runaway youth, foster care, Head Start and Even Start. Do not adjust the count to compensate for applications that the LEA approved incorrectly. In the Base Year column, enter the number of free and reduced price eligible students. (Refer to Instructions for PROVISION 2 S-2, 201a and CRE Guidance, Critical Areas). Determine the number of paid eligible students by subtracting the free and reduced eligible counts from the Total Number of Students with Access to the SBP/NSLP recorded in S-1, 4 for the base year. The number of students eligible for free, reduced price, and paid meals should be estimated for the Current Year by multiplying the Reviewer's Count of Eligible Students for the Base Year, Provision 2 S-1,13, by the Percent Change in Students with Access, Provision 2 S-1, 4. These current year estimates will be used to complete 402a and 404a on the Provision 2 S-4 form and on the General Areas of Review forms, 702c. Enter the current year estimates in the Current Year column.

INSTRUCTIONS FOR PROVISION 2 S-1 SCHOOL DATA FORM (continued)

13. Enter the school's total counts and reviewer's total counts for the day of review. (Refer to Instructions for PROVISION 2 S-3, 302a.) Calculate and record the difference. Differences with a positive (+) sign indicate an overclaim; those with a negative (-) sign indicate an underclaim.
- 14a. **BASE YEAR:** a. Enter the school's base year counts. b. Record the claiming percentages developed by the SFA to claim free, reduced price and paid lunches in non-base years. c. Enter the SFA's base year claim for the school and d. the reviewer's validated base year counts for the review period. The reviewer must use the same approach (individual school monthly, individual school annualized, SFA-wide annualized, etc.) that was used to prepare the claim for reimbursement. (Refer to Instructions for Provision 2 S-4, 405a.) Column e is shaded since fiscal action is not calculated for differences identified in the base year.
- 14b. **CURRENT YEAR:** Enter the School's Total meal count in column a. Using the Reviewer Validation from the base year (BY), calculate claiming percentages for each category by dividing free lunches by total lunches; reduced price lunches by total lunches and paid lunches by total lunches, and multiply each result by 100 to convert to a percentage. Record the validated claiming percentages under Provision 2 S-1, 15 B, Current Year, BY Valid %, column b. If the free, reduced and paid percentages do not total 100 percent, adjust the paid category upward or downward to equal 100 percent. If the SFA is using SFA wide claiming percentages, record the validated SFA wide claiming percentages that were identified on SFA-2, 105 b or d. Obtain the SFA Claim for this school for the Current Year review period and enter in column c. Apply the validated percentages to the Current Year Total count recorded in column a to determine the Reviewer Validation for the Current Year Review Period and enter these calculated lunch counts by category under Provision 2 S-1, 15 B, Current Year Reviewer's Validation, column d. Calculate and record the difference between the SFA's claim and the reviewer's validated counts in column e. This difference would be included on FA-1 if there are no application errors.
15. Calculate the Average Daily Participation (ADP) factor. Divide the Base Year Reviewer's Validated meal counts by category* recorded in PROVISION 2 S-1, 14, by the Base Year number of Serving Days recorded in PROVISION 2 S-1, 6. Divide this number by the Base Year Reviewer's Count of Eligible Students recorded in PROVISION 2 S-1, 12. Round the participation factors obtained to three decimal places.
16. Record the number of meals served to ineligible and/or second meals counted on the day of the review. (Refer to Instructions for PROVISION 2 S-2, 301a.)
17. Record the total number of incomplete meals resulting from PS2 Errors being offered on the serving line. *A PS2 error is defined as *A PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, and at the State agency's discretion, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium and trans fat).*

If the menu is missing one or more components, or contains *repeated violations* for vegetable subgroups or milk type, all meals served from that menu cannot be claimed and must be recorded in PROVISION 2 S-1, 17, Total Meals with PS2 ERRORS. If food runs out during the meal service, count the number of meals with PS2 errors as a result of inadequate menu planning and/or preparation and record in PROVISION 2 S-1, 17. (Refer to Instructions for PROVISION 2 S-3, 304c.)
18. Record the total number of meals observed. This should include the number of complete and incomplete meals. Separately record the number of incomplete meals resulting from students not taking the number of components as required. In this case, the student was given an opportunity to select a reimbursable meal, but elected not to take it, and the meal was recorded as reimbursable at the point of service. (Refer to Instructions for Provision 2 S-2, 305c.)

SFA:		School:		
REVIEW AREAS	YES	NO	N/A	COMMENTS
Performance Standard 1 Eligibility Certification Applications and Direct Certification 201a. Review of applications from the base year included: _____ All applications; or _____ A statistically valid sample. b. Were all applications approved correctly for this school? c. Were all direct certification, homeless, migrant, runaway youth, foster care, Head Start and Even Start eligibles correctly certified for this school? If NO to b. or c., explain in Comments. Record errors on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.				
Benefit Issuance 202a. Did the review of 10% of the names on the base year benefit issuance document result in a 5% or greater error rate? b. If YES, additional review included: _____ All names on the benefit issuance document; or _____ A statistically valid sample of names on the benefit issuance document. Record errors on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.				_____ Names on Benefit Issuance Document x 10% (.10) = _____ Names to Review. _____ Number of Names in Error ÷ _____ Number of Names Reviewed = . _____ x 100 = _____ %.
Updating Eligibility 203. Were changes in eligibility status increased no later than 3 operating days and decreased no later than 10 operating days from the final decision? Record errors on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.				

INSTRUCTIONS FOR PROVISION 2 S-2

ELIGIBILITY CERTIFICATION

If this school is being reviewed during a non-base year, a review of applications* and benefit issuance documents is required unless these materials were reviewed during the school's base year, or during a subsequent review. If Eligibility Certification (201), Benefit Issuance (202) and Updating Eligibility (203) were reviewed during the school's base year, check [✓] N/A for each question and go to Day of Review; Performance Standard 1-Counting and Claiming, PROVISION 2, S-3.

If Eligibility Certification (201), Benefit Issuance (202) and Updating Eligibility (203) were not reviewed during the school's base year or during a subsequent review, follow procedures below using the applications, direct certification, homeless, migrant, runaway, foster, Head Start, Even Start and benefit issuance documents for the school's base year.

- 201a. Obtain all of the eligibility documentation (applications*, direct certification, homeless, migrant, runaway youth, foster care, Head Start and Even Start) for those students who had access to the NSLP and SBP, as applicable, during the base year review period. Count the number of students approved for meal benefits for the base year review period as made by the Local Education Agency (LEA). If there is no date on the application, direct certification or other eligibility documentation, consider it a valid application for the review period. Record this information on PROVISION 2, S-1, 12. Indicate if all applications or a statistically valid sample are reviewed. If using a statistically valid sample, follow the instructions for statistical sampling procedures in the CRE Guidance, Statistical Sampling, and retain documentation. Check [✓] NA if a review of eligibility documents was done prior to the CRE and is not being done at this time.
- b. Review and evaluate eligibility determinations for completeness and accuracy. Indicate if the application approval process is implemented correctly. Answer YES, if all applications are approved correctly. If any errors are noted, answer NO and explain in the Comments section. Record all discrepancies on the Certification and Benefit Issuance Error Worksheet, PROVISION 2, S-5.
- c. Indicate if the direct certification and other eligibility determinations are correct. If direct certification and other eligibility documentation do not contain the required information, record the students as miscategorized on the Certification and Benefit Issuance Error Worksheet, PROVISION 2, S-5. If any errors are noted, answer NO and explain in the Comments section.
- 202a. Test the system of benefit issuance, from the base year records, e.g., tickets, rosters, tokens by comparing a minimum of every 10th name listed as approved for free or reduced price meal benefits shown on benefit issuance documentation to the eligibility determinations. If more than 10% of the names are reviewed, record the procedure used to select the names in the Comments section. Complete the chart in the Comments section to determine the error rate. Enter the number of free and reduced price students listed on the benefit issuance document and multiply by 10% (.10) to determine the number of names to review. Round to the nearest whole number. Enter the number of students listed incorrectly on the benefit issuance document and divide by the number of names reviewed. Carry to 4 places beyond the decimal, round to 3 places beyond the decimal and multiply by 100 (example: $.0875 = .088 = 8.8\%$) to determine the percent in error, i.e. the error rate.
- b. If 5% or more of the names are in error, indicate if the additional review included either all remaining names on benefit issuance documentation, or a statistically valid sample. If using a statistically valid sample, follow the instructions for statistical sampling procedures in the CRE Guidance, Statistical Sampling, and retain documentation. Record all discrepancies on the Certification and Benefit Issuance Error Worksheet, PROVISION 2, S-5.
203. Determine if there were changes in eligibility as a result of verification* or resubmitted applications during the review period. If changes were required and not made within the required timeframes, answer NO. If there were no changes, check [✓] N/A and indicate if the LEA has established procedures in place to update eligibility by the required timeframes. Record all discrepancies on the Certification and Benefit Issuance Error Worksheet, PROVISION 2, S-5.

COORDINATED REVIEW EFFORT

SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 2
NON-BASE YEAR

NSLP () SBP ()

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	COMMENTS
Day of Review Performance Standard 1 Counting and Claiming				
301a. Does each type of food service line as observed on the day of review provide an accurate count by eligibility category at the point of service (or approved alternate)?				
b. If NO, describe the problem and indicate why the problem was: ___ Non systemic ___ Systemic *				
302a. Were the meal count totals by category* correctly combined and recorded? b. Were the meal count totals correctly distributed to each category* by using the SFA's or school's claiming percentages established in the base year? c. Were the counts by category recorded correctly? b. If NO, describe the problem and indicate why the problem was: ___ Non systemic ___ Systemic *				
303a. Is fiscal action needed for problems identified in 301. and/or 302? b. If NO, describe reasons.				

* Response results in PS 1 Violation. Record NO on SFA-1, 4.

INSTRUCTIONS FOR PROVISION 2 S-3a

DAY OF REVIEW

- 301a. Observe and indicate whether an accurate count of reimbursable meals is taken at the point of service or an approved alternate. To answer YES, the system must be based on an actual count of students served and must consistently yield correct results. A NO answer is needed when an accurate count of meals by category is not observed. If second meals or meals served to ineligible were observed, answer NO and record in School Data, PROVISION 2, S-1, 16.
- b. If 301a is answered NO, investigate the problem to determine if the causes are non-systemic or systemic. Describe why the problem was non-systemic or systemic and the fiscal and corrective action recommended. When the reviewer is unable to identify the actual number of reimbursable meals incorrectly claimed and there is no actual total count, the fiscal action required is recalculation of the meal counts. A Systemic problem (*) results in a Performance Standard 1 violation for this school.
- 302a .Observe how the meal counts by category are obtained from each point of service and combined for the total meal count for the school. Record the School's Total Count for the Day of Review on PROVISION 2, S-1, 13. Validate the meal count and record as the Reviewer's Counts for the Day of Review on School Data PROVISION 2, S-1, 13. Calculate the differences to determine if the procedures used by the school were accurate. If there were differences between the school's total counts and the reviewer's total counts, the question must be answered NO.
- b. If the school, on the day of review, distributes the total lunch count to categories (free, reduced price and paid) using claiming percentages developed in the base year, determine if the claiming percentages were applied correctly. Record the school's counts by category and the reviewer's validated counts in the Comments section. Calculate the difference to determine if the procedures used by the school were accurate. If there was a difference between the school's counts by category and the reviewer's validated counts, the question must be answered NO. If the school does not distribute the total lunch counts by category, check N/A.
- c. Determine if the school recorded the meal count(s) for the day correctly.
- d. If 302 a, b or c are answered NO, investigate to determine if the causes are nonsystemic or systemic. Describe why the problem was nonsystemic or systemic and the fiscal and corrective action recommended. When the reviewer is unable to identify the actual total number of meals incorrectly claimed and there is no accurate total count, the fiscal action required is recalculation of the meal counts. A Systemic problem (*) results in a Performance Standard 1 violation for this school.
- 303a. Indicate if fiscal action is needed based on the problems identified in 301 and 302. If there are no problems, answer NA. (For additional information, refer to the CRE Guidance, Critical Areas.)
- b. If there are problems in 301 and/or 302 and fiscal action is not necessary, explain why in the Comments section.
- If a systemic problem is identified in 301 or 302 which results in fiscal action, it will be necessary to obtain information from Claims for Reimbursement for all affected claiming periods. Record information from other claiming periods on Other Meal Claim Errors - Fiscal Action Required, PROVISION 2, S-8.

COORDINATED REVIEW EFFORT

**SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR**

NSLP () SBP ()

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	COMMENTS
Performance Standard 2 Day of Review Menus <i>To answer the questions below, State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist, (Table 1, or similar table), written menu (s), production records, weighted nutrient analysis, and other supporting documentation to determine compliance with the daily/weekly meal pattern requirements including portion sizes.</i>				
304a. Were all required meal components available to all students participating in NSLP/SBP (210.10 and 220.8)?				
b. If NO, explain.*				
c. Record the number of meals with PS2 Errors on School Data, PROVISION 2 S-1, 17 and School Worksheet for Meals with PS2 Errors, PROVISION 2 S-7.				
305a. Did all observed meals claimed for reimbursement contain the required number of meal components?				
b. If NO, explain. c. Record number observed and incomplete on School Data, PROVISION 2 S-1, 18.				

PROVISION 2 S-3b

INSTRUCTIONS FOR PROVISION 2 S-3b

DAY OF REVIEW

Performance Standard 2 Day of Review Menus

To answer the questions in this section, State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist, (Table 1, or similar table) written menu (s), production records, weighted nutrient analysis, and other supporting documentation to determine compliance with the daily/weekly meal pattern requirements including portion sizes.

***A PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, and at the State agency's discretion, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium and *trans* fat).**

- 304a. Prior to the meal service evaluate if all required meal components (including vegetable subgroups, milk type, whole grains) are available and comply with the written menu, and/or other supporting documentation such as production records, standardized recipes, food labels, etc. The school should be advised and given the opportunity to add any missing meal component (s) before the meal is served. If the missing meal component (s) is added, answer YES but record the deficiency and technical assistance which was provided in the Comments section. The reviewer must observe that a sufficient number of /all meal components are available and comply with the written menu, and/or other supporting documentation throughout the meal service for each serving line. Indicate if all menu meal components are available. A NO answer is required if a meal component is not available.
- b. If the school did not have all the required meal components available on each service line, describe the problem in the Comments section.
- c. Determine the number of meals affected which are counted and reported incorrectly for reimbursement. Record the number of non-reimbursable meals on PROVISION 2 S-1, 17 and School Worksheet for PS2 ERRORS, PROVISION 2 S-7. If only one menu is offered, all meals are affected. If two or more menus are offered, refer to the CRE Guidance, Critical Areas, for further information.
- 305a. Observe and indicate if all meals counted for reimbursement contain the required number of meal components. If the reviewer observes one or more incomplete meals counted as reimbursable, a NO answer is required. Record the total number of meals observed. This should include the number of complete and incomplete meals. Separately record the number of incomplete meals resulting from students not taking the required meal and number of meal components required. In this case, the student was given an opportunity to select a reimbursable meal, but elected not to take it, and the meal was recorded as reimbursable at the point of service.
- b. If the school counted meals where the students did not take all the required meal components as reimbursable meals, describe the problem in the Comments section.
- c. Record the total number of meals observed and the number of incomplete meals counted as reimbursable on School Data, PROVISION 2 S-1, 18. Incomplete meals recorded in 304c must not be included in 305c.

COORDINATED REVIEW EFFORT

SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR NSLP () SBP ()

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	COMMENTS
Performance Standard 2 - Day of Review Menus <i>State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist, (Table 1 or similar table) written menu (s), production records, weighted nutrient analysis, and other supporting documentation should be used to answer the questions below.</i>				
306a. Do portion sizes appear to meet the minimum amounts as planned or required for the day of review? b. If NO, do meal documentation records for the review period indicate that required quantities of food were available?				
307. If a variety of food is offered within a reimbursable meal, are all choices available to students eligible for free or reduced price meals?				
308a. Was fluid milk available in at least two options throughout the serving period on all serving lines? b. Are only low-fat or fat-free milk choices offered? c. If flavored milk is offered, is it fat-free? d. If fluid milk substitutes are offered for non-disabled students with medical or special dietary needs, do the choices meet nutritional requirements in 210.10(d)(3) milk?				
309. Is accurate information (i.e., signage) about choosing a reimbursable meal, including the required food items/meal components for a reimbursable meal under OVS, available at, or near, the beginning of each serving line?				
310. Is offer vs serve properly implemented?				
311. Review menus, production records, and supporting documentation to determine if menu changes/substitutions have been made and if the changes/substitutes were made, were these consistent with the meal pattern requirements.				

INSTRUCTIONS FOR PROVISION 2 S-3b (continued)

MENUS

To answer the questions, State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist, (Table 1, or similar table) written menu (s), production records, weighted nutrient analysis, and other supporting documentation to determine compliance with the daily/weekly meal pattern requirements including portion sizes.

- 306a. Determine the planned portion sizes for the day of review menu and observe all points of service to determine whether portion sizes served meet the planned quantities required.
 - b. If it appears that portion sizes do not meet the planned quantity requirements as served, review the school's documentation and procedures, such as production records and nutrient analysis records for the review period, to determine if it is a consistent practice.
- 307. Determine if a variety of food offered within a reimbursable meal and that all choices are available to children eligible for free or reduced price meals. Schools may establish different unit prices for each reimbursable meal offered provided that the benefits made available to children eligible for free or reduced price meals are not affected.
- 308 a. Determine if at least two different options of fluid milk were available throughout the meal service on all serving lines. All milk must be fat-free or low-fat. Milk with higher fat content is not allowed. Fat-free fluid milk may be flavored or unflavored, and low-fat fluid milk must be unflavored. Low fat or fat-free lactose-free and reduced-lactose fluid milk may also be offered.)
 - b. Determine if only low-fat or fat free milk choices are offered.
 - c. Determine if all flavored milk options offered are fat-free.
 - d. Determine if fluid milk substitutes offered for non-disabled students with medical or special dietary needs meet 210.10(d)(3).
- 309. Determine if accurate information (i.e., signage) about choosing a reimbursable meal, including the required food items/meal components for a reimbursable meal under OVS, is available at, or near, the beginning of each serving line.
- 310. If the school uses the offer versus serve provision, determine if it has been properly implemented.
- 311. Review menus, production records, and supporting documentation to determine if menu changes/substitutions have been made and if the change/substitutes were consistent with the meal pattern requirements.

COORDINATED REVIEW EFFORT

**SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR**

NSLP () SBP ()

SFA:		School:		
REVIEW AREAS	YES	NO	N/A	COMMENTS
Review Period Performance Standard 1 Counting and Claiming				Day of Review Total _____
401a. Are meal counts by category for the review period reasonable compared to meal counts for the day of review?				Review Period Lowest to Highest _____ to _____
b. If NO, obtain the school's explanation and record in the Comments section.				
c. Does this explanation describe an acceptable meal count system?		*		
402a. Were there any days when the total count exceeded the number of students who have access to the NSLP and SBP, as applicable?				
b. If YES, was an acceptable explanation available for each day?		*		
403a. Were Base Year applications, certification documents and meal counts by category retained by the LEA/SFA and available for review?				
b. If NO, record the LEA/SFA's explanation as to why the records were not available in the Comments section.		*		
404a. Were there patterns in the meal counts which appear questionable?				
b. If YES, obtain the school's explanation and record in the Comments section.				
c. Do the patterns indicate questionable meal count practices?	*			
405a. Were the meal counts by category correctly determined using the claiming percentages established in the base year?				
b. Were the meal counts by category* correctly used in the Claim for Reimbursement?				
c. If NO to a or b, explain and indicate why the problem was: _____Nonsystemic _____Systemic *				
406a. Is fiscal action needed for problems identified in 401 through 405?				
b. If NO, describe reasons.				

* Response results in PS 1 Violation. Record NO on SFA-1, 4

INSTRUCTIONS FOR PROVISION 2 S-4a

REVIEW PERIOD

- 401a. Obtain a copy of the meal counts by category for each serving day of the review period and compare it to the day of review count. Record the school's meal counts by category for the day of review and for the lowest day and the highest day during the Review Period in the chart in the Comments section. This comparison should be made to the number of meals reported by the school, prior to any daily meal adjustments which may have been made by the SFA as a result of edit checks, etc. However, if the reviewer determined that a non-systemic error occurred in the school's day of review count, the validated counts on the day of review may be used. Evaluate the counts and indicate if unreasonable shifts occurred in the counts by category from the review month to the day of review. Optional Form O-4 can be used to record this information.
- b. If NO to 401a, obtain the school's explanation and record in the Comments section.
- c. Determine and indicate if the explanation describes an acceptable meal count system. A NO response (*) results in a Performance Standard 1 violation for this school.
- 402a. Determine and indicate if the school claimed more total meals on any day of the review period than the Total Students with Access to the NSLP and SBP, as applicable, from PROVISION 2 S-1, 12. This determination should be made using the number of meals reported by the school, prior to any daily meal adjustments which may have been made by the SFA as a result of edit checks, etc.
- b. If YES, determine if there was an acceptable explanation for each day the total meals claimed was greater than the number of Total Students with Access to NSLP and SBP, as applicable. Answer NA if there were no days where the total meal count exceeded the number of students with access. A NO response (*) results in a Performance Standard 1 violation for this school.
- 403a. Determine whether Base Year applications, (and other certification documentation for free and reduced price meals) and meal counts by category were retained by the LEA/SFA and are available for review. A NO response (*) results in a Performance Standard 1 violation for this school.
- b. If NO, obtain the LEA's/SFA's explanation and record in the Comments section.
- 404a. Examine the patterns of the reported counts of total meals for the current year review period and indicate if the counts are questionable for the population of students participating in the school's meal program.
- b. Indicate, after considering the explanation provided, if the patterns suggest questionable meal counts practices, A YES response (*) results in a Performance Standard 1 violation for this school.
- 405a. Determine and indicate whether the claiming percentages for this school were correctly calculated using meal count information from the base year or from annualized or SFA district-wide data.
- b. Determine if the meal counts by category that were calculated using the claiming percentages were correctly used in the Claim for Reimbursement.
- Part of this evaluation will depend on information obtained at the SFA level. Optional Form O-4 can be used to record this information. Record the school's reported total meal counts on PROVISION 2 S-1, 14b,. Current Year Total. Enter the SFA's claim for this school in School Data, PROVISION 2, S-1, 14b,. If the school submits one monthly claim period report, validate the entire month by summing the daily meal count totals. If the school submits other than a monthly claim period report, validate one of the school's report submissions, i.e., daily, weekly, bi-weekly. Combine the validated total count with the other reports for the review period and record the results in PROVISION 2, S-1, 14b,. If the validated total count is different than the school's reported total count, investigate and determine if the SFA correctly claimed total meal counts for the school. Answer YES if the validated count matches the SFA's claim for this school. If the reviewer's validated total lunch count did not match the SFA's total claimed lunch count, answer NO and describe the problem.
- c. Investigate to determine where the problem occurred and if the causes are nonsystemic or systemic. Describe why the problem was nonsystemic or systemic and the fiscal and corrective action recommended. A Systemic problem (*) results in a Performance Standard 1 violation for this school.
- 406a. If YES, describe the fiscal action to be taken including the time period covered. When the reviewer is unable to identify actual meals incorrectly claimed and there is an unacceptable meal count practice in the review month, recalculation is required. If a systemic problem is identified which results in fiscal action, obtain information from Claims for Reimbursement for all affected claiming periods. Record information from other claiming periods on Other Meal Claim Errors - Fiscal Action Required, PROVISION 2, S-8. Answer NA only when no problems were identified in 401 - 405.
- b. If there are problems in 401 - 405 and fiscal action is not necessary, explain why in the Comments section.

**SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR**

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	Comments
Performance Standard 2 Review Period Menus 407a. Did menu records, weighted nutrient analysis and/or other supporting documentation for the review period indicate that all required items were offered including vegetable sub-groups, milk types, and 100% whole grain-rich foods? b. If NO, explain and record on the School Worksheet for PS2 ERRORS, S-7.				
408. Are minimum weekly requirements met for each age/grade group: a. Meat/Meat alternate? b. Grains? - Are 100% of grains offered as whole grain-rich products? c. Fruit? - Are half or less of the fruits offered throughout the week in the form of juice? d. Total Vegetables/vegetable sub-groups - Dark green? - Red/orange? - Beans/peas? - Starchy? - Other? e. Are half or less of the vegetables offered throughout the week in the form of juice?				
409. Do manufacturer's food labels, packaging, or bid specifications indicate zero grams of <i>transfat</i> per serving?				
410. Does the weighted nutrient analysis, averaged over one school week, indicate the content of meals are in compliance for: - Calories? - Saturated Fat? - Sodium?				

INSTRUCTIONS FOR S-4b

REVIEW PERIOD

- 407a. Obtain a copy of the menu records, weighted nutrient analysis and/or other supporting documentation such as production records, standardized recipes, food labels, etc. for the review period to determine if all required / meal components were offered on each serving day of the review period.
- b. If a menu is missing required meal components, investigate to determine if the menu was used in other claiming periods and explain in the Comments section. Record the menu missing meal components and other PS2 errors, and number of meals claimed for reimbursement that were affected for the review period on the School Worksheet for PS2 ERRORS, S-7. Record deficient menus and meal counts for other claiming periods on Other Meal Claim Errors - Fiscal Action Required, S-8. If the SF uses a centralized menu, fiscal action and corrective action must be taken for all schools using the central menu, including those schools that were not reviewed.
- 408a-e. Review menus and determine if the minimum weekly requirements for each meal pattern component identified have been met for each week of the review period.
- 409. Review manufacturer's food labels, packaging, or bid specifications to determine compliance with zero grams of *trans* fat per serving?
- 410. Determine if the weighted nutrient analysis (averaged over one school week) indicates the content of meals are in compliance with the daily calorie, saturated fat, and sodium requirements. Completion of one weighted nutrient analysis for each age/grade group of one selected school for both NSLP and SBP, as applicable, is required.

[illegible]

If the application has missing information only, do not check any boxes under miscategorized.

COMMENTS:	# STUDENTS WITH PS 1 VIOLATIONS		CATEGORY / #	SERVING DAYS IN ERROR		
				REVIEW PERIOD	PRIOR FY	CURRENT FY
		FREE	1.	F → R /	3.	7.
F → D /				4.	8.	12.
REDUCED		2.	R → D /	5.	9.	13.
			R → F /	6.	10.	14.

INSTRUCTIONS FOR PROVISION 2 S-5

CERTIFICATION AND BENEFIT ISSUANCE ERROR WORKSHEET

Enter the student's name and the eligibility determination made by the LEA or school. If an error is identified for any student who has withdrawn within or after the review period from this school, indicate original determination of free, reduced, or denied.

Enter the start date of the error. This may be the application approval date or the date the infraction first occurred. If the date is not known, enter a dash (-) in the space and note the date of the 31st operating day for this school in the space provided. If the student is receiving meal benefits based on direct certification, homeless, migrant, runaway youth, foster care, Head Start or Even Start, check [✓] the DIR CT column.

The reviewer should check [✓] the appropriate column to indicate the type of missing information.

CH HH NM: CHILD/HOUSEHOLD NAME CS #: SNAP, TANF OR FDPIR CASE NUMBER INC AMT FRQ SRC: INCOME AMOUNT/FREQUENCY/SOURCE
SS #: LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER AD SIG: ADULT SIGNATURE

The reviewer should check [✓] the appropriate column to indicate the type of miscategorization error.

F/R: The school/SFA approved the application as free, but the reviewer determines it should be reduced.

F/D: The school/SFA approved the application as free, but the reviewer determines it should be denied.

R/D: The school/SFA approved the application as reduced, but the reviewer determines it should be denied.

R/F: The school/SFA approved the application as reduced, but the reviewer determines it should be free.

D/F: The school/SFA denied the application, but the reviewer determines it should be free.

D/R: The school/SFA denied the application, but the reviewer determines it should be reduced.

Refer to PROVISION 2 S-6 instructions for procedures to establish the percent of error for schools reviewed in a non-base year setting and to calculate the error rate for determining a PS1 error. Use PROVISION 2 S-6a to calculate fiscal action.

Check [✓] the error identified for students issued benefits for a category other than the one for which they were approved.

RED REC FRE: A student approved for reduced meals, but received free meals.

FRE REC RED: A student approved for free meals, but received reduced.

INELIG REC FRE: A student was ineligible for benefits or no application was on file, but received free meals.

INELIG REC RED: A student was ineligible for benefits or no application was on file, but received reduced price meals.

ELIG NO BEN FRE: A student eligible for free meals, but received no benefits.

ELIG NO BEN RED: A student eligible for reduced meals, but received no benefits.

COORDINATED REVIEW EFFORT

PERFORMANCE STANDARD 1 - MEAL ERROR RATE DETERMINATION

NA []

SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR

[] NSLP [] SBP

SFA:	School:
------	---------

Base Year Applications Reviewed: All [] Sample [] Reviewed in: Base Year [] Current Year [] Other []				
CHART A Current Year	Estimate		Actual	
	Free	Reduced	Free	Reduced*
1. Total number of students with errors contributing to a PS 1 violation.	From S-5, 1	From S-5, 2		
2. Number of serving days in review period from S-1, 6.	X	X		
3. Maximum number of meals for students with errors contributing to a PS 1 violation.	=	=	From S-5, 3+4	From S-5, 5+6
4. Average daily participation factor from S-1, 15.	X	X	X	X
5. Number of meals incorrectly claimed. (Complete PROVISION 2 S-6a, chart C, Column 4 to arrive at numbers to enter on this line.)	=	=	=	=
6. Adjusted number of free <u>plus</u> reduced price meals incorrectly claimed.				
7. Total number of free <u>plus</u> reduced price meals validated for the review period from S-1, 14. Current Year, Reviewer's Validation.	÷		÷	
8. Percent of meals claimed incorrectly for this school.	X 100 =		X 100 =	

PROVISION 2 S-6

September 1, 2014

INSTRUCTIONS FOR PROVISION 2 S-6; LINES 5 - 8

PERFORMANCE STANDARD 1 - MEAL ERROR RATE DETERMINATION

The PROVISION 2, S-6 is used to determine if the school exceeded the Performance 1 threshold for the current year review period. Complete PROVISION 2, S-6a chart B and Chart C to calculate information needed to complete this form.

For Base Year Applications reviewed, check [✓] if ALL or a Sample of applications was reviewed.

Check [✓] when the review of the base year applications was done; either during the Base Year, the Current Year, or some other time, i.e., sometime between the base year and the current year.

5. Enter the number of lunches incorrectly claimed for free and reduced from PROVISION 2, S-6a, Chart D, Column (5), Difference, Free and Reduced without regard for plus or minus signs.
6. Add the number of free meals and the number of reduced price meals, or each NSLP and SBP, as applicable. Record the sum of these numbers by NSLP and SBP, as applicable.
7. From PROVISION 2, S-1, 14 (Current Year Reviewer Validation) enter the total free plus reduced price meals for each NSLP and SBP, as applicable, validated by the reviewer.
8. Divide the number of free plus reduced price meals incorrectly claimed (line 6) by the total number of free plus reduced price meals validated for the review period (line 7). Carry to 4 places beyond the decimal, round to 3 places beyond the decimal and multiply by 100. (example: $.0875 = .088 = 8.8\%$). Record the percent of meals claimed incorrectly for this school in PROVISION 2 S-6, 8 and on SFA-1, 4. Do not round 9.95 through 9.99 to 10.0.

SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR

SFA:	School:
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REVISED CLAIM FOR BASE YEAR REVIEW PERIOD OR ANNUALIZED CLAIMING PERCENTAGES

CHART B	(1) Original # Eligible as Determined by the LEA and Counted by the Reviewer S-1, 12 Base Year	(2) Verified By Reviewer	x (3) Serving Days S-1, 6 Base Year	x (4) Participation Factor S-1, 16 Base Year	= (5) Revised Monthly Meal Count Totals Base Year	÷ (6) Total Meals Validated for Base Year Review Period S-1, 14a, Total	= (7) Revised Percent for Review Period Only or Annualized %
Free							
Reduced*							
Paid*							
Total							100%

Round column (5) to the nearest whole number. Multiply column (7) by 100 to convert to percent.

Paid was adjusted from _____ to _____ that makes total meals equal to total original meals.

CALCULATION OF PERCENT CHANGE AND CLAIMING PERCENTAGES

Comparison of Original with the Revised Percentages			
CHART C	(1) Original Percentages (Use only if original claiming %s were validated) S-1, 14b, Current Year, Column b, BY Validated %	(2) Revised Percent From Chart B , Column (7)	(3) Percent Change Column (2) minus Column (1) and record as + or -
Free			
Reduced*			
Paid*			

CURRENT YEAR REVIEW PERIOD – PERFORMANCE STANDARD 1 CALCULATION

CHART D	(1) Actual Review Period Claim From S-1, 14b, Current Year, Column c	(2) Revised Claiming % From Chart B, Column (7)	(3) Current Year Review Period Total From S-1, 14b, Current Year, Column a	(4) Revised Review Period Claim Column (3) times Column (2)	(5) Difference Column (1) minus Column (4) + or - *
Free					
Reduced*					
Paid*					
Total		100%			

* Enter Free and Reduced on S-6, Chart A, Line 5. Disregard + or - indicator when recording on S-6.

CURRENT YEAR – MEAL COUNT ADJUSTMENTS

CLAIM PERIOD: _____

	(1)	(2)	(3)	(4)	(5)	(6)	(7)
CHART E	Difference From Chart D, Column (5) + or -	Total Meals for each Claim Period From End of Review Period to Corrective Action Completion	SFA Correct Claiming % for the Claim Period plus or minus Chart C, Column (3)	Revised Claim From End of Review Period to Corrective Action Completion Column (2) X Column (3)	SFAs Actual Claim from end of Review Period to Date of Corrective Action	Difference Column (5) minus Column (4) + or -	Meal Count Adjustments Column (1) plus Column (6) + or -
Free							
Reduced							
Paid							
Total			100%				

INSTRUCTIONS FOR PROVISION 2 S-6a

Designate [✓] NSLP or SBP, as applicable for each program reviewed. Use one set of forms for NSLP and one set of forms for SBP, as applicable.

If applications were not reviewed during the base year, review and ascertain proper category of approval. If errors are found during this application review, they must be listed on the S-5. However, fiscal action and Performance Standard 1 violations would be determined as described below. Due to the method of calculations, benefit issuance errors would not be a consideration if the review is conducted in a non-base year.

The following charts are designed for use with SFAs using monthly claims on a school by school basis. If the SFA is using annualized or SFA-wide claiming percentages, appropriate revisions will need to be made to the data in Chart B, Column (1) through (7). Also, if annualized claiming percentages are used, there is no need for monthly adjustments to the claiming percentages in Chart e for any claim period after the review period to the date of corrective action.

CHART B REVISED CLAIMING PERCENTAGES FOR BASE YEAR REVIEW PERIOD OR ANNUALIZED CLAIMING PERCENTAGES

- (1) Determine for any month in the base year after the LEA has approved applications (preferably the month that corresponds to the current year review period) the total number of free, reduced price, and paid eligibles, both as determined by the LEA and counted by the reviewer.
- (2) Enter the number of eligibles as determined or verified by the reviewer after identifying any errors in categorization.
- (3) Enter the number of serving days from PROVISION 2, S-1, 6 Base Year.
- (4) Enter the Base Year Participation Factor from PROVISION 2, S-1, 15, Base Year, or if actual lunch participation by category by child is available, skip this step and enter corrected meal counts in Column (5).
- (5) Calculate Revised Monthly Meal Count Totals for the Base Year by multiplying Column (2) times Column (3) times Column (4) rounding only once in Column (5). Make any adjustments in the paid category to make the total revised count equal the original total, if applicable. Fill in the blanks below the chart to document the change made to the paid category.
- (6) Enter Total meals validated by the reviewer for this school from PROVISION 2, S-1, 14a, Base Year.
- (7) Divide Column (5) by Column (6) and enter the resulting revised claiming percentage for each category in Column (7), making any adjustments in the Paid category to make the Total equal 100%.

CHART C CALCULATION OF PERCENT CHANGE AND CLAIMING PERCENTAGES

- (1) Enter the original claiming percentages the SFA or school developed (if the original claiming percentages were validated) from S-1, 14b, Current Year, BY Validated %.
- (2) Enter the Revised Percent from CHART B, Column (7).
- (3) Calculate the Percent Change by subtracting Column (1) from Column (2).

Apply these percent changes for each category to all other claiming percentages for all other months in the base year, that is, increase or decrease the original percentage by the amount of the percent of change. The reviewer should ensure that the claiming percentage calculations for other claim periods are mathematically correct before making adjustments to those claiming percentages.

Note: If the review is conducted in the base year, the percentages would be adjusted for the periods up to the time the SFA implements the corrected applications. This would need to be done for future years' claims.

CHART D CURRENT YEAR REVIEW PERIOD – PERFORMANCE STANDARD 1 CALCULATION

- (1) Enter the SFA Claim for this School for the Review Period from PROVISION 2 S-1, 14b, Current Year.
- (2) Enter the Revised Claiming Percentages from CHART B, Column (7).
- (3) Enter School's Reported Total Count for the Review Period from PROVISION 2 S-1, 14b, Current Year.
- (4) Multiply Column (3) times Column (2). Round to whole meals using normal rounding procedures.
- (5) Subtract Column (4) from Column (1). Enter Free, Reduced, Paid and total here and enter Free and Reduced meals in the appropriate columns on PROVISION 2 S-6, Chart A, Line 5. Disregard the + or – sign for this step. Rows 6, 7 and 8 on the PROVISION 2 S-6 can now be completed.

CHART E MEAL COUNT ADJUSTMENTS: If there is one or more claim period(s) after the review period before corrective action is taken, the procedures in Columns (2) through (6) must be completed for each claim period before combining with the Difference in Column (1). Additional copies of Chart E are located on form PROVISION 2 S-6b. These copies should be used to make adjustments to other claim periods.

- (1) Enter the Differences from CHART D, Column (5). Show as + or -.
- (2) Enter the total number of meals claimed from the end of the review period to the date of corrective action (or the next claiming period, whichever comes sooner.) If there is more than one claiming period from the end of the review period to the date of corrective action, the procedures in Columns (2) through (6) need to be completed for each claiming period.
- (3) Check the SFA's math to determine if the SFA correctly calculated the claiming percentages for this Claim Period. Using the mathematically correct claiming percentages for this review period, add or subtract (as indicated by the + or – signs) the Percent Change from CHART C, Column (3).
- (4) Multiply Column (2) times Column (3).
- (5) Obtain the SFAs claims for this school for each claiming period from the end of the review period to the date of corrective action.
- (6) Subtract Column (4) from Column (5).
- (7) Enter Meal Count Adjustments by adding Column (1) and Column (6). Minus (-) indicates an underclaim; plus (+) indicates an overclaim.

Sum column (6) from multiple claim periods. Combine the sums by category from Column 6 with the differences by category in Column 1. Record these combined amounts in Column (7) and FA-1, line 1, Number of Meals Claimed Incorrectly, by category. Fiscal action would be taken from the beginning of the review period until the SFA implements the revised claiming percentages.

SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR

SFA:	School:
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CURRENT YEAR – FISCAL ACTION CALCULATIONS

CLAIM PERIOD: _____

	(1) Difference From Chart D, Column (5) + or -	(2) Total Meals for each Claim Period From End of Review Period to Corrective Action Completion	(3) SFA Correct Claiming % for the Claim Period plus or minus Chart C, Column (3)	(4) Revised Claim From End of Review Period to Corrective Action Completion Column (2) times Column (3)	(5) SFAs Actual Claim from end of Review Period to Date of Corrective Action	(6) Difference Column (5) minus Column (4) + or -	(7) Meal Count Adjustments Column (1) plus Column (6) + or -
CHART E							
Free							
Reduced							
Paid							
Total			100%				

CURRENT YEAR – FISCAL ACTION CALCULATIONS

CLAIM PERIOD: _____

	(1) Difference From Chart D, Column (5) + or -	(2) Total Meals for each Claim Period From End of Review Period to Corrective Action Completion	(3) SFA Correct Claiming % for the Claim Period plus or minus Chart C, Column (3)	(4) Revised Claim From End of Review Period to Corrective Action Completion Column (2) times Column (3)	(5) SFAs Actual Claim from end of Review Period to Date of Corrective Action	(6) Difference Column (5) minus Column (4) + or -	(7) Meal Count Adjustments Column (1) plus Column (6) + or -
CHART E							
Free							
Reduced							
Paid							
Total			100%				

CURRENT YEAR – FISCAL ACTION CALCULATIONS

CLAIM PERIOD: _____

	(1) Difference From Chart D, Column (5) + or -	(2) Total Meals for each Claim Period From End of Review Period to Corrective Action Completion	(3) SFA Correct Claiming % for the Claim Period plus or minus Chart C, Column (3)	(4) Revised Claim From End of Review Period to Corrective Action Completion Column (2) times Column (3)	(5) SFAs Actual Claim from end of Review Period to Date of Corrective Action	(6) Difference Column (5) minus Column (4) + or -	(7) Meal Count Adjustments Column (1) plus Column (6) + or -
CHART E							
Free							
Reduced							
Paid							
Total			100%				

PROVISION 2 S-6a (continuation sheet)

**SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR
SCHOOL WORKSHEET FOR MEALS WITH PS2 ERRORS**

SFA:		School:			
Day of Review					NA []
		Number of Meals with PS2 Errors By Category			
1. Menu	2. Meals with PS2 Errors	3. Total	4. Free	5. Reduced	6. Paid

Current Year Review Period						NA []
			Number of Meals with PS2 Errors By Category			
7. Date	8. Menu	9. Meals with PS2 Errors	10. Total	11. Free	12. Reduced	13. Paid
TOTAL						

INSTRUCTIONS FOR PROVISION 2 S-7

SCHOOL WORKSHEET FOR MEALS WITH PS2 ERRORS

This worksheet should be used to record information for the day of review and/or review period if a menu is identified which contain PS2 errors. **A PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, and at the State agency's discretion, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium and trans fat).*

DAY OF REVIEW: If the menu(s) for the day of review contained all required meal components for the entire meal service and no problems were noted, check [☒] NA.

If a menu with PS2 errors was identified at the beginning of the meal service or all meal components were not available throughout the entire meal service, complete the following:

1. Record the menu which contained PS2 error (s).
2. Record the missing meal component or other PS2 error.
3. Determine the number of meals counted as reimbursable which contained PS2 errors. Record the total number of meals which were affected.
- 4, 5, 6. Using the appropriate claiming percentages for the day of review, record the number of meals with PS2 errors by category: free, reduced and paid.

Record the total meals affected by the PS2 errors on the day of review on PROVISION 2 S-1, 17.

REVIEW PERIOD: If menus for the review period indicate that all required meal components (including vegetable sub groups, milk types, and whole grain-rich products) were available, check [☒] NA.

If one or more menus were identified which did not contain all of the required meal components (including vegetable subgroups, milk types, and whole grain-rich products), complete the following:

7. Enter the date of the menu with PS2 errors.
8. Record the menu with PS2 errors.
9. Record the missing meal component or other PS2 error.
10. Determine the total number of meals claimed as reimbursable which contained PS2 errors.
- 11, 12, 13. Using the appropriate claiming percentages for the review period PROVISION 2, S-6a, Chart B, Column (7)), record the number of lunches claimed as reimbursable which were missing the meal component by category: free, reduced and paid.

OTHER MEAL CLAIM ERRORS - FISCAL ACTION REQUIRED
SPECIAL ASSISTANCE PROVISION 2 NON-BASE YEAR

SFA:	School:
------	---------

			Number of Meals			
A.	B.	C.	D.		E.	F.
SFA or School	Claim Period	Describe Type of Error	SFA or School Data		— Reviewer's Data	= Difference + or -
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
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			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=

INSTRUCTIONS FOR PROVISION 2 S-8

OTHER MEAL CLAIM ERRORS - FISCAL ACTION REQUIRED

All errors identified during the review must be corrected. Record all identified errors which occurred in other claim periods or review period errors, not previously recorded. These errors do not contribute to the PS 1 Violation threshold, but are subject to fiscal action.

1. Check [☒] NA if errors were not identified in other claim periods.
2. SFA, School - If the form is being used to record only SFA errors, enter NA for the school. If used to record school errors, enter school name.

COLUMN

- A. Identify where the error occurred. Enter SFA or S (school). For PS2 errors in schools that were not reviewed, record each school's meal counts separately or record the total for the SFA.
- B. Record the claim period affected by the error.
- C. Indicate the type of error, including date of error. Examples of the types of errors that must be recorded are listed in CRE Guidance, Critical Areas.
- D. Record the number of meals claimed for reimbursement by the SFA for the school. If the errors occurred at the SFA, enter the total number of meals claimed for reimbursement.
- E. Record the number of validated meal counts by category*, when appropriate.
- F. Calculate the difference between column D and column E.